BIRCH, STEWART, KOLASCH & BIRCH, LLP

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

	(if plural inventors are named below) of the	subject matter which is cl	aimed and for which a patent is	sought on the invention entitled:				
Insert Title:	"PELVIS CORRECTION APPA							
	the specification of which is attached hereto.	If not attached hereto,						
	the specification was filed on			as				
Information - For Use Without Specification Attached:	United States Application Number							
	and amended on		(i					
	the specification was filed on		as PCT					
	International Application Number		; and was					
	amended on			(if applicable)				
	I hereby state that I have reviewed and by any amendment referred to above. I acknowledge the duty to disclose info §1.56. I do not know and do not believe the thereof, or patented or described in any pri prior to this application, that the same was application, that the invention has not bee application in any country foreign to the Ur more than twelve months (six months for d on this invention has been filed in any courepresentatives or assigns, except as follow. I hereby claim foreign priority benefit or inventor's certificate listed below and ha a filing date before that of the application of	rmation which is material to same was ever known or u nted publication in any contoo in public use or on sale n patented or made the sunited States of America on sesigns) prior to this applicantry foreign to the United states and the united states of the United states are under Title 35, United States also identified below are	sed in the United States of Americantry before my or our invention in the United States of America bject of an inventor's certificate an application filed by me or my ation, and that no application for States of America prior to this tates Code, §119 (a)-(d) of any foreign application for patent	it, Code of Federal Regulations, rica before my or our invention a thereof or more than one year more than one year more than one year prior to this issued before the date of this legal representatives or assigns patent or inventor's certificate application by me or my legal preign application(s) for patent				
		on which priority is claime	· .					
Insert Priority Information: (if appropriate)	Prior Foreign Application(s)			Priority Claimed				
	(Number)	(Country)	(Month / Day / Year Filed)	- □ □ □ Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No				
	(Number)	(Country)	(Month / Day / Year Filed)	- 🗍 🗍 Yes No				
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.							
	(Application Number)			(Filing Date)				
	(Application Number)			(Filing Date)				
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:							
Insert Requested Information:	Country	Appl	ication Number E	Date of Filing (Month / Day / Year)				
nsert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:							
Application(s):	(Application Number)	(Filing Date)	(Status - pater	us - patented, pending, abandoned)				
	(Application Number)	(Filing Date)	(Status - noter	ited mending abandoned)				

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

PLEASE NOTE: YOU MUST BIRCH, STEWART, KOLASCH & BIRCH, LLP or **CUSTOMER NO. 2292** P.O. Box 747 • Falls Church, Virginia 22040-0747

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FOLLOWING:							
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*		
Insert Name of Inventor Insert Date This Document is Signed	Masaru	Tanaka	MasaRu Ta	Vaka	23/10/03		
Insert Residence Insert Citizenship	Residence (City, State & Co Itabashi-ku, To	CITIZENSHIP Japan					
Insert Mailing Address	MAILING ADDRESS (Complete Street Address including City, State & Country) 2-33-6, Narimasu, Itabashi-ku, Tokyo 175-0094, Japan						
Full Name of Second Inventor, if any:		MILY NAME anaka	INVENTOR'S SIGNATURE	ka	23/10/03		
see above	Residence (City, State & Co	ountry)	urazaro janaj	CITIZENSHIP	<u> </u>		
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Full Name of Third Inventor, if any	GIVEN NAME FA	MILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State & Country)			CITIZENSHIP			
	MAILING ADDRESS (Comp	lete Street Address inclu	ding City, State & Country)				
Full Name of Fourth Inventor, if any	GIVEN NAME FA	MILY NAME	INVENTOR'S SIGNATURE		DATE*		
. sec above	Residence (City, State & Co	untry)		CITIZENSHIP			
·	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any	GIVEN NAME FAI	MILY NAME	INVENTOR'S SIGNATURE		DATE*		
see above	Residence (City, State & Country) CITIZENSHIP						
Page 2 of 2 Revised 01/02)	MAILING ADDRESS (Compl	ete Street Address includ	ding City, State & Country)	L			
	DATE OF SIGNATURE						